#### PATENT APPLICATION

Attorney Docket No. D/A2429

### **DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: **IMAGING MEMBERS** 

the specification and claims are attached hereto		on as U.S. Appli	cation No	
I hereby state that I have rethe claims.	eviewed and understand the	ne contents of the above-id	entified specification, includin	ıg
I acknowledge the duty to Code of Federal Regulation		ch is material to the pater	ntability as defined in Title 3	7,
	ted below, and have also	identified below any foreig	iny foreign or U.S. Provision on application(s) or Provision on priority is claimed:	
Prior Foreign or U.S. Provis	ional Application(s)	•		
(Number) (Country)		(Day/Month/Year Filed)		
		hereby appoint the followin		
Mark Costello Ronald F. Chapuran Kevin R. Kepner Nola Mae McBain	Reg. No. 31,342; Reg. No. 26,402; Reg. No. 32,145; Reg. No. 35,782;	Eugene O. Palazzo Elizabeth F. Harasek		
ADDRESS ALL CORRESPONDENCE TO: Patent Documentation Center Xerox Corporation 100 Clinton Avenue South, Xerox Sq. 20 <sup>th</sup> Floor Rochester, New York 14644		DIRECT TELEPHONE (name and telephone n Eugene O. Palazzo r 585-423-4687		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

# **DECLARATION AND POWER OF ATTORNEY, continued**

Name of sole or first	inventor: Timothy P. Bender	
Inventor's Signature: Residence: 905-12 Citizenship: Canad	2 Helene Street N., Port Credit, Ontario, Canada	Date: a L5G 3B5 Mailing Address: (Same as above)
Name of second join	t inventor: John F. Graham	
Inventor's Signature: Residence: 2384 I Citizenship: Canad	Dalebrook Drive, Oakville, Ontario, Canada L6H	Date: H 6K4 Mailing Address: (Same as above)
Name of third joint in	ventor: James M. Duff	
Inventor's Signature: Residence: 6185 I Citizenship: Canad	Montevideo Road, Mississauga, Ontario, Canada	Date: a L5N 2E8 Mailing Address: (Same as above)
	Fallen Leaf Terrace, Webster, NY, USA 14580	Date: 10/9/03  Mailing Address: (Same as above)
Name of fifth joint inv	ventor: Nancy L. Belknap	11.1
Inventor's Signature: Residence: 103 W Citizenship: USA	Vest Forest Drive, Ploohester, NY, USA 14624	Date: (0/66/0)  Mailing Andress: (Same as above)

#### PATENT APPLICATION

Attorney Docket No. D/A2429

### DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

(Number)	(Country	<b>'</b> )		(Day/Month/Year File	ed)
Prior Foreign or U.S. Provisional Application(s)					
I hereby claim priority benefits application(s) for patent listed tapplication(s) for patent having	oelow, and	d have also ide	ntified be	low any foreign appl	ication(s) or Provisional
I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56.					
I hereby state that I have review the claims.	ved and u	nderstand the c	ontents o	f the above-identified	d specification, including
the specification and claims of v  are attached hereto	_	was filed on _		as U.S. Application	No
I believe I am the original, first a inventor (if plural names are lies sought on the invention entitled	sted belov	w) of the subje	one nam ct matter	e is listed below) or a which is claimed ar	an original, first and joint nd for which a patent is
My residence, post office address and citizenship are as stated below next to my name,					
As a below named inventor, I hereby declare that:					

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following registered practitioners to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Mark Costello Reg. No. 31,342; Eugene O. Palazzo Reg. No. 20,881; Ronald F. Chapuran Reg. No. 26,402; Elizabeth F. Harasek Reg. No. 28,850;

Kevin R. Kepner Reg. No. 32,145; Nola Mae McBain Reg. No. 35,782;

ADDRESS ALL CORRESPONDENCE TO: DIRECT TELEPHONE CALLS TO:

Patent Documentation Center (name and telephone number)
Xerox Corporation Eugene O. Palazzo

100 Clinton Avenue South, Xerox Sq. 20<sup>th</sup> Floor 585-423-4687

**Rochester, New York 14644** 

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

# **DECLARATION AND POWER OF ATTORNEY, continued**

Name of sole of		Fimothy P. Bender	Date: Sept 25/03
Residence:		eet N., Port Credit, Ontario, Canada L5G	3B5 Mailing Address: (Same as above)
	•	John F. Graham	Date: Sept 25/03
Inventor's Sign Residence:		ive, Oakville, Ontario, Canada L6H 6K4	Date:
	Canada	re, carrine, charle, carlada Lorrora	Mailing Address: (Same as above)
Name of third j	joint inventor:	James M Duff	
Inventor's Sign		101	Date: 012/63
	6185 Montevideo R Canada	Road, Mississauga Ontario, Canada L5N	I 2E8  Mailing Address: (Same as above)
Name of fourth	n joint inventor:	Andronique Ioannidis	
Inventor's Sign			Date:
		errace, Webster, NY, USA 14580	Ma-92 A.J. I
Citizenship:	Canada		Mailing Address: (Same as above)
Name of fifth jo	oint inventor:	Nancy L. Belknap	
Inventor's Sign	nature:		Date:
Residence:	103 West Forest D	rive, Rochester, NY, USA 14624	
Citizenship:	USA		Mailing Address: (Same as above)